Our Ref:

Medical Directors

Renal Clinical Directors

Trust Infection Prevention Control Leads

**By Email**

Dear Colleague

During the COVID-19 pandemic, the highest risk group of patients for death from COVID-19 has been 24,000 UK patients with end stage kidney disease (ESKD) requiring in-centre haemodialysis (ICHD). Unlike other clinically extremely vulnerable (CEV) groups, the need for dialysis treatment thrice weekly prevents patients from self-isolating and may result in a greater risk of exposure to SARS-Cov-2 owing to hospital visits.

Linked UK Renal Registry and Public Health England (PHE) data indicate that there was approximately a one in five (20%) risk of death within 14 days for those ICHD patients who acquired COVID-19 in the first wave of the pandemic. The risks were high even among young dialysis patients: the risk of death from COVID-19 for an ICHD patient aged 40-59 during the period to the end of June was about 2.5 times as high as an 80+ year old in the general population

(<https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0241263>).

**By 11 November almost 3% of patients (662) receiving ICHD in the UK had died of COVID-19, and approximately half of these patients were below 65 years of age.1**

**Vaccination**

The UK Renal Association and British Renal Society have written to the Joint Committee on Vaccination and Immunisation requesting prioritisation of COVID-19 vaccination for patients receiving in-centre haemodialysis to Priority Group One (equivalent to Elderly Care Home Residents).

**Screening**

The North West Renal Network endorses the updated screening recommendations within the UK Renal Association and British Renal Society “Recommendations for Minimising the Risk of Transmission of SARS-CoV-2 (COVID-19) in UK Adult Haemodialysis Units” 2 and the Greater Manchester Mass Testing Expert Group recommendations.3

Surveillance testing has been carried out in a variety of units in the UK since May 2020 and found to be both feasible and helpful in preventing outbreaks, including The Wirral and Salford Royal NHS Foundation Trust.

Given the consistently high infection rates seen in the North West, the North West Renal Network specifically recommends weekly testing for in centre haemodialysis patients.

**Additional Information1**:

1. ESKD requiring ICHD is 3-4x more common in people of south-Asian and black ethnicity and is also independently associated with deprivation, groups particularly affected by COVID-19. Unless COVID-19 vaccination programmes are prioritised for this group then pre-existing health inequalities will increase further.
2. The median age of patients receiving ICHD in the UK is 67.4 years; therefore the majority of patients receiving ICHD are not captured by the proposed prioritisation system until group 4. Patients of south-Asian ethnicity and black ethnicity receiving ICHD are younger than people of white ethnicity.
3. Patients who receive ICHD are easily accessible to secondary care services whilst receiving dialysis treatment and are less able to access primary care treatment. The renal community routinely provides hepatitis B and seasonal Flu vaccine to ICHD patients and could rapidly and efficiently deliver the vaccine to all consenting patients if given priority access to the vaccine.

The renal community is in a position to accurately monitor immune response and through the UK Renal Registry monitor impact on COVID-19 rates.

1. The treatment of choice for ESKD is transplantation; delays in transplantation are associated with an increased risk of death but transplant programmes have been severely disrupted by COVID. 16% of kidney transplant recipients who tested positive with COVID-19 have died from their illness to date. The majority of patients on kidney transplant waiting lists are also receiving ICHD. COVID-19 vaccination of waiting list patients before transplantation will enable full re-opening of kidney transplant programmes with major benefits on healthcare value.

The North West Renal Network has considered the evidence and guidelines outlined within this letter and have made the following recommendations:

**• In centre haemodialysis patients should be prioritised for surplus vaccines irrespective of age**

**• In centre haemodialysis patients should receive weekly PCR screening**

Yours sincerely

**References:**

1. RA/BRS letter to JCVI 7-12-2020
2. RA/BRS Recommendations for Minimising the Risk of Transmission of SARS-CoV-2 (COVID-19) in UK Adult Haemodialysis Units December 2020

<https://renal.org/sites/renal.org/files/KQuIP/Recommendations%20for%20minimising%20risk%20of%20transmission%20of%20COVID-19%20on%20UK%20ha....pdf>

1. Greater Manchester Mass Testing Expert Group recommendations November 2020